

COMBINED DECLARATION AND POWER OF ATTORNEY

402-093.17
(Docket Number)

As a below named inventor, I hereby declare that:

- my residence, post office address and citizenship are as stated below next to my name;
- I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **System for Extending Length of a Connection to a USB Peripheral**
- the specification of which is attached hereto unless the following box is checked: ☐. If the box is checked,
 - the application was filed on _____
 - as U.S. Application Number _____
 - or PCT International Application Number _____
 - and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR §1.56.

I hereby claim foreign priority benefits under 35 U.S.C. §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application			Priority Not Claimed
(Application Number)	(Country)	(Day/Month/Year Filed)	<input type="checkbox"/>
(Application Number)	(Country)	(Day/Month/Year Filed)	<input type="checkbox"/>
(Application Number)	(Country)	(Day/Month/Year Filed)	<input type="checkbox"/>

To the extent permitted by rule or law, I hereby incorporate by reference the Prior Foreign Application(s) listed above.

I hereby claim the benefits under 35 U.S.C. §119(e) of any United States provisional application(s) listed below:

(Provisional Application Number)	(Day/Month/Year Filed)
(Provisional Application Number)	(Day/Month/Year Filed)

I hereby claim the benefit under 35 U.S.C. §120 of any United States application(s), or §365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability, as defined in 37 CFR §1.56, which became available between the filing date of the prior application and the national or PCT International filing date of this application.

(Application Number)	(Day/Month/Year Filed)	(Status--patented, pending, abandoned)
(Application Number)	(Day/Month/Year Filed)	(Status--patented, pending, abandoned)

00670790-092700

I hereby appoint the attorney(s) and/or agent(s) assigned to the customer number listed below, as may from time to time be amended, belonging to the firm of **Ware, Fressola, Van Der Sluys & Adolphson LLP**, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Customer Number

4955



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Address all telephone calls to: Ware, Fressola, Van Der Sluys & Adolphson LLP at (203) 261-1234. Address all correspondence to:

Customer Number

4955



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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Michael G. ENGLER

Full name of sole or first inventor (given name, middle initial, FAMILY NAME(S) IN UPPER CASE)

Michael G. Engler
Inventor's Signature

9/22/2000
Date

Stamford, Connecticut Residence

USA
Citizenship

Post Office Address: **41 Weed Hill Avenue, Stamford, CT 06907**

Full name of second inventor (given name, middle initial, FAMILY NAME(S) IN UPPER CASE)

Inventor's Signature

Date

Residence

Citizenship

Post Office Address:

Full name of third inventor (given name, middle initial, FAMILY NAME(S) IN UPPER CASE)

Inventor's Signature

Date

Residence

Citizenship

Post Office Address:

☐ Additional inventors are being named on separately numbered sheets attached hereto.

Approved for use through 03/03/00. Call 0801-2031
Patent and Trademark Office DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

STATEMENT CLAIMING SMALL ENTITY STATUS **(37 CFR 1.9(f) & 1.27(c))—SMALL BUSINESS CONCERN**

DocId Number (Optional)
402-093.17

Applicant, Patentee, or Identifier: Michael G. ENGLER

Application or Patent No.: _____

Filer/Issuer: Herevich

Title: System for Extending Length of a Connection to a USB Peripheral

I hereby state that I am

☐ the owner of the small business concern identified below.

☒ an official of the small business concern empowered to act on behalf of the concern identified below.

NAME OF SMALL BUSINESS CONCERN Lightwave Communications, Inc.

ADDRESS OF SMALL BUSINESS CONCERN 100 Washington Street, Milford, CT 06460-

3133

I hereby state that the above identified small business concern qualifies as a small business concern as defined in 13 CFR Part 121 for purposes of paying reduced fees to the United States Patent and Trademark Office. Questions related to size standards for a small business concern may be directed to: Small Business Administration, Size Standards Staff, 409 Third Street, SW, Washington, DC 20418.

I hereby state that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention described in:

☒ the specification filed herewith with title as listed above.

☐ the application identified above.

☐ the patent identified above.

If the rights held by the above identified small business concern are not exclusive, each individual, concern, or organization having rights in the invention must file separate statements as to their status as small entities, and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d), or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern, or organization having any rights in the invention is listed below:

☒ no such person, concern, or organization exists.

☐ each such person, concern, or organization is listed below.

Separate statements are required from each named person, concern or organization having rights to the invention stating their status as small entities. (37 CFR 1.27)

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

NAME OF PERSON SIGNING DAVID B CHEEVER

TITLE OF PERSON IF OTHER THAN OWNER PRESIDENT

ADDRESS OF PERSON SIGNING 100 WASHINGTON ST MILFORD CT 06460

SIGNATURE David B Cheever

DATE 9-26-2000

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patent, Washington, DC 20231.

(Small Entity—Small Business (PTO/SB/10) [7-4.1]—page 1 of 1)

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